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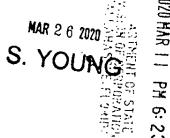
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COVER LETTER

TO:

	sistration Section ision of Corporations				
CUDIECT.	OLYMPUS COMMER	CIAL INVESTMEN	TS LLC		
SUBJECT:		Name of Limite	d Liability Company	<i>*</i>	·
The enclosed	l Articles of Amendmen	t and fee(s) are subm	itted for filing.		
Please return	all correspondence con-	cerning this matter to	the following:		
	GUSTA	VO A. ALVAREZ			
			Name of Person	1	
			Firm/Company		
	10655 C	OAK BEND WAY			
			Address		 _
	WELLI	NGTON, FL 33414			
			City/State and Zip (ode	
	GALVA	REZ@ABPLUSENC		1 2 2 2 2	
For further in	nformation concerning th			inual report notificati	on)
		ns matter, please can	•		
GUSTAVO	A. ALVAREZ		561 at (676-7823)	
	Name of Person		Area Code	Daytime Tel	ephone Number
Enclosed is a	check for the following	amount:			
□ \$25.00 F		0 Filing Fee & ificate of Status	S55.00 Filing Certified Cop (additional copy	у	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.C	iling Address: gistration Section vision of Corporation D. Box 6327 lahassee, FL 32314	ns	Reg Div The 241	et Address: istration Section ision of Corpora Centre of Talla 5 N. Monroe Stahassee, FL 32	ations ihassee reet, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OLYMPUS COMMERCIAL INVESTMENTS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liabili	ty Company were filed on DECEMEBR	31, 2019 and assigned
Florida document number L20000008118	·	23
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
OLYMPUS COMMERCIAL INVESTMENTS LLC		
The new name must be distinguishable and contain the words	'Limited Liability Company," the designation "!	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AL		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or regist agent and/or the new registered office address her		ter the name of the new registered
agent and/or the new registered office address her	<u> </u>	
Name of New Registered Agent:		
Maine of New Registered Agent.		
New Registered Office Address:	Enter Florida street add	dracs
	City	Florida Zip Code
	City	Elp Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JULIANA ALVAREZ	10655 OAK BEND WAY	□ Add
		WELLINGTON, FL 33414	■Remove
		<u> </u>	□Change
			□ Add
		·	□Remove
			□Change
			⊡Add
•		· <u>-</u>	□Remove
			Change
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ffective date, if other	er than the date of filing the date must be specific and	3:		(option	nal)
an effective date is listed Note: If the date inser	, the date must be specific and led in this block does not n	cannot be prior to dineet the applicable	ate of filing or more: statutory filing re	than 90 days after fi quirements, this o	ling.) Pursuant to 605,02 late will not be listed :
ocument's effective d	ate on the Department of S	tate's records.			
,	1 00 11 11	.			
record specifies a dela Lis filed.	yed effective date, but not	an effective time,	at 12:01 a.m. on t	he earlier of: (b)	The 90th day after th
	MARCH 9	2020	. Y	/ n	
)ated					
Pated	 .		11/1/	(->//	
Dated	5:		ed representative of a		

Filing Fee: \$25.00